

**Disability Management Services, Inc.**  
 A third-party administrator for:  
**Massachusetts Casualty Insurance Company**

**Continuance of Disability**

TO BE COMPLETED BY THE INSURED

1) Insured's name: <i>ERIC JEFFRIES</i>	2) Policy number(s): <i>0641734</i>	3) Claim number(s): <i>402696</i>
4) Residence address: <i>712 GLENSHIRE AVE. CINCINNATI, OHIO 45226</i>		5) Telephone number: <i>513-871-3545</i>
6) Describe in detail your typical daily activities: <i>IT DEPENDS; MY ILLNESS TENDS TO OSCILLATE. ON GOOD DAYS, I TRY TO PLAY WITH MY CHILDREN. ON BAD DAYS, I TRY TO CONSERVE ENERGY AND REST, AS TO NOT FURTHER EXACERBATE THE DOWN CYCLE.</i>		
7) Have you performed any work since the date of your last report? Yes _____ No <u><i>X</i></u>		8) If "No" state when you expect to resume work: <i>AS SOON AS POSSIBLE</i>
9) If "Yes", give dates, hours and describe duties performed, along with monthly earnings:		
10) Are you now eligible for, have you applied for, or are you receiving income benefits from:		
Social Security Disability or Retirement Benefits	Yes _____ No _____	Workers' Compensation
Unemployment Compensation	Yes _____ No _____	Pension Disability
Any other Disability Income Benefit	Yes <u><i>X</i></u> No _____	State Disability Plan
11) If "Yes" to any of the items in question #10, please provide details including amounts received, effective dates, and the name of the company, organization, or governmental agency from which benefits are being received: <i>I AM NOW ELIGIBLE FOR, AND HAVE APPLIED FOR, DISABILITY INCOME FROM PRUDENTIAL.</i>		

Any person who knowingly, and with intent to defraud or deceive any insurance company, files a statement of claim containing any false, incomplete or misleading information is or may be guilty of a criminal act punishable under law.

Signature: <i>E. Jeffries</i>	Date: <i>12 APRIL 1999</i>
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Please complete your portion of the form on the reverse side and forward the form to your attending physician.

Please return to:  
 711 Atlantic Ave.  
 P.O. Box 9099  
 Boston, MA 02205-9099 Tel(617) 728-8000  
 d/b/a: New England Claims Administration Services, Inc. in (FL, MD, ME)  
 Centre Claims Administration Services in (NH)

CLAIM 02923

S E M  
JUN 15 1999

## CLAIMS SERVICE REPORT

DATE: \_\_\_\_\_ TIME: \_\_\_\_\_ TO: \_\_\_\_\_

COMPLETED BY: \_\_\_\_\_ INSURED: Jeffie's

CALLER: \_\_\_\_\_ TELEPHONE #: \_\_\_\_\_

REMARKS: - also blinding headaches.  
- abdominal pain extreme  
- things are not going away between attacks  
- talked about yesterday.  
- yesterday good - went out with kids  
+ wife to beach. - 1/2 day.  
- spent time + home.  
- 513 702 2236 cell #  
- discussed keeping a log detailing  
daily activities + Sx  
- I suggested a week but E  
says he can go for 1 week  
periods where he is relatively  
OK  
- E suggests keeping it over  
two week period - he will do  
so starting over next 2 weeks  
- E will call me when he  
speaks to Kovac's

ent By: ERIC JEFFRIES;

513 871 8599;

Jul-31-99 8:36PM;

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ERIC L. JEFFRIES  
712 GLENSHIRE AVENUE  
CINCINNATI, OHIO 45226  
(513) 871-3545 PHONE  
(513) 871-8599 FAX

31 July 1999

Mr. Spencer E. McNeil  
Disability Management Services  
711 Atlantic Avenue  
Boston, Massachusetts 02205-9099

Dear Mr. McNeil:

I am writing to give you an update on my medical condition. Since we last spoke on the telephone, I have continued to see a number of physicians in an effort to get well. I'll try to fill you in on the highlights.

You may recall from our last conversation that a doctor suggested that I might have a metabolic liver disorder called Acute Intermittent Porphyria. I have tested positive for this disease, but only with moderately increased levels of porphobilinogen (PBG) and aminolevulinic acid (ALA). Increases in these two chemistries are used to confirm the diagnoses of porphyria. Usually the increases are elevated to higher levels than I had, so I'm not sure this is the base of the problem. I'm going to talk with the doctors this week about this.

I have also been diagnosed with Cold Agglutinin disease. It is my understanding that this is a rare blood disease which is typically caused by some other disease / disorder. I expect to learn more about this disease in the coming week.

The last couple of weeks have been pretty rough. I've had to go to the emergency room three times because I've been feeling so bad. I actually thought I was going to die a couple of times. Last Sunday, my heartbeat was bouncing between 60 and 150 beats per minute all day. I tried to just not move from bed, but with my other host of problems, it began to get the better of me. At the time I checked into the hospital, my pulse was 103 bpm. My urine has intermittently been very dark and red lately, sort of like a mixture of tea and red wine. The hospital lab checked and confirmed that it was not blood. Upon review by the liver specialist, he indicated that the urine had a lot of heme in it which was causing the dark color. The doctors are searching to see if I have some type of liver disease / disorder that has been causing my illness. Going back over my medical files you can see that my liver function tests have always been abnormal. Yesterday I was in the hospital for a liver biopsy and I should have the results in a few days.

CLAIM 02758

Sent By: ERIC JEFFRIES;

513 871 8599;

Jul-31-99 6:36PM;

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Mr. McNeil  
31 July 1999  
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Overall, the illness continues to wax and wane in severity, but I am determined to identify the cause and cure. Please contact me should you wish to speak with me personally about this.

Sincerely,



Eric Jeffries



**Professional Disability Consultants, Inc.**

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**DETAIL CALL**

**TO: FILE**

**FROM: C. PALMER, R.N., M.Ed., C.C.M.**  
**CONSULTANT - PDC, INC.**

**RE: ERIC JEFFRIES**  
**MASS CASUALTY INSURANCE COMPANY**  
**CLAIM # 0641734**

**DATE: SEPTEMBER 30, 1999**

On September 27, 1999, I was able to speak to Mr. Jeffries. Our conversation lasted about one and a half hours. I made the contact with Mr. Jeffries and he returned my call after I left my 800 number.

At the outset of the call I identified myself as a nurse consultant working at the request of the individual managing his claim with Mass Casualty Insurance Company. I explained that I had had the opportunity to review his claim file record, as well as to attempt to make contact with his physicians.

We then went on to discuss the basis for his claim. Mr. Jeffries stated that he stopped working in September of 1998. He stated that he needed to stop working secondary to his disability. I asked him what he understood to be his diagnosis. He stated "in my opinion" he is having a reaction secondary to a vaccination he received for hepatitis B approximately two years before the present. He states this has resulted in a peculiar autoimmune reaction. He stated that very recently, the actual date was not provided, he saw a physician who is apparently expert in the evaluation of this kind of reaction and has actually testified in Congress about this. This doctor is Dr. Waisbren, associated with the University of Wisconsin and the Waisbren Clinic. I asked him how he learned about this physician and he indicated that he had been researching options and information on the Internet, and that Dr. Waisbren has a Web site. He also provided the phone number of the Waisbren Clinic (414-272-1929). He went on to explain that he does not fully understand the mechanism, but he understands there may be some kind of underlying pathology which is related to the T10 receptor cells. Regarding Dr. Waisbren's treatment, Mr. Jeffries states that there has been the prescription of gamma globulin, and Valtrex. Dr. Waisbren indicated that he would create a letter of explanation of the evaluation and treatment. The gamma globulin will be given by injection. He plans to proceed with the injections, having already had one when he saw Dr. Waisbren. When Mr. Jeffries saw Dr. Luggen today, he would have had another injection, but the medication was not available at the pharmacy. He also needs to get someone to write a prescription for it to be covered by his insurance.

I inquired as to what he expects from the treatment provided by Dr. Waisbren. He said that he is of the opinion that some people do get a positive response. He states the injections will be biweekly, and he plans to try it for at least a month. He stated that Dr. Waisbren would not be committed to any sort of expected outcome. He also said that Dr. Waisbren discussed with him another approach to treatment, which would be utilizing an immunosuppressant or other drugs that might be used in

Lucinda A. Palmer, R.N., M.Ed., C.C.M. \* PDC, Inc. \* 1350 Main Street, 10<sup>th</sup> Floor, Springfield, MA 01103-1619  
Telephone #: 1-800-463-0095, Ext. 1109 \* 413-747-9432, Ext. 1109 \* Fax #: 413-747-9376

CLAIM 02348

Memo to File -- Eric Jeffries

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cancer treatment. I asked him if he understood the long-term prognosis of this particular medical problem, and he states that he understands some people are sick for up to 15 years, and others seem to get better more quickly.

We then went on to discuss who are his other physicians. He explained his family practice physician is Dr. McClellan. Formerly, his family practice doctor was a Dr. Nunlist-Jones, who had been his family practice physician for several years. That was the doctor who had given him the hepatitis vaccine. He stated that after he had the reaction to the vaccine something changed in his relationship with Dr. Nunlist-Jones. He really had not considered filing any lawsuit against Dr. Nunlist-Jones, but there was, again, some kind of change in his relationship. Mr. Jeffries seemed to think that Dr. Nunlist-Jones was under the impression that Mr. Jeffries was going to sue him. Also Mr. Jeffries added that Mr. Jeffries' wife did not particularly care for Dr. Nunlist-Jones and she had made the change to another physician even prior to the injection of the hepatitis B vaccine.

I also inquired about the presence of any other lawsuit, given that he had raised the point that he was not suing Dr. Nunlist-Jones. He did state that he is participating in a lawsuit against the manufacturer of the vaccine, "with about 10,000 other people." He states that there is a lawyer representing them and there is some sort of "injury fund" that they may have to claim against.

The other physician that Mr. Jeffries has seen is a Dr. Luggen. In fact, Mr. Jeffries states that he had actually seen him earlier on the date of our phone call. Mr. Jeffries believes that at this point Dr. Luggen is beginning to agree that the diagnosis is a response to the hepatitis B vaccine. He also stated that Dr. Luggen, who is associated with a university, periodically participates in case conferences. Dr. Luggen had been apparently waiting to present Mr. Jeffries' case within this conference for more than a year, and within the last week, had done the presentation. It was the impression of the professional colleagues of Dr. Luggen that there may be something to the idea of the response to the vaccine. He states that essentially Dr. Luggen has been very conservative in his considerations, but that he is beginning to feel that Dr. Luggen's thinking is "in line" with Dr. Waisbren. The other diagnosis that was suggested at the case conference was porphyria, which is related to metabolic changes within the liver. Mr. Jeffries has seen a liver specialist (Dr. Jonas), and there is no clear cut understanding that there is a liver problem.

Mr. Jeffries states he gets "attacks." These wax and wane and the last bad one that he had was in July of 1999. He states that since the onset of the problem he has had "four big ones," and several smaller ones. When he had his most recent big one, in July, he was sick for about one whole month. The symptoms included very severe headaches, physical pain which he states is like "chainsaws," occasional nauseousness, a sense of muscles "burning," swelling eyes, sores in the mouth and nose, and a very fast heartbeat. He also states during those times that he has difficulty sleeping, and gets a kind of mental foginess which even causes him to be lost in his own neighborhood. Generally speaking he cannot walk, he cannot sleep, and he has tremendous pain just doing the least-demanding physical activities such as going to a movie with his wife during these attacks. He went on to state that one other sign of this problem is "my stools float." I told him that I was not sure that I understood why that was such a problem, and that I have actually spoken to people who think that if you eat the right amount of roughage in your diet, then it will cause your stools to float. He stated he had never heard of that before.



Memo to File -- Eric Jeffries

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I asked how he was doing today. He states on the date of our conversation that he was actually having a better day. He states that he has been "taking it easy." He states a couple of days ago he was having muscles burning in his legs, and he is basically just recovering from that minor episode.

I inquired what he believes is impairing him from doing his pre-claim occupation, as an international banker. He states "I could not travel like I did before." He started to explain that his job requires that he participate in negotiations of very large amounts of money, sometimes deals that include up to 40-50 million dollars. He states that there usually are multiple deals going on simultaneously. He could not possibly do his job and keep that kind of detail and sophisticated discussion going in his head if he was having that kind of mental foggiess. He has no idea when he is going to get an attack and he has no idea how long attacks will last at all.

I wanted to confirm the names of all his current physicians, in that we discussed that he had seen multiple physicians in the past. He states the primary physicians he is seeing currently are Dr. McClellan, Dr. Luggen, and Dr. Waisbren. He also saw a Dr. Belanti at Georgetown University, who is a physician who has apparently also testified at Congressional hearings and authored a textbook on immunology. He saw him one time a few weeks prior to our conversation. According to Mr. Jeffries, Dr. Belanti also believes that the problem that he was suffering is secondary to the hepatitis B vaccine. I guess Dr. Belanti also suggested that other tests might be considered, including a liver biopsy. He may also start some intravenous medication of the gamma globulins, but Dr. Waisbren told Mr. Jeffries that the intramuscular treatment is nearly as effective as the intravenous treatment of gamma globulins and it costs less. I inquired about his response to the treatment of the one-time injection of the gamma globulin he has had to date, and Mr. Jeffries stated "my head is a little clearer."

Because Mr. Jeffries had undergone a great deal of diagnostic evaluation and had seen numerous physicians, I asked him if he was fully convinced that it was not another kind of medical problem. He stated "I am not sure how to answer that, I am not positive that it is not another problem." He did go on to say that he has always been a perfectly healthy individual and only started to have any of these problems approximately one week after he had the injection. I asked if due to the one week lag in symptoms, this condition might be another problem. He stated that from what he has learned from reading about this kind of problem, it is not uncommon for adults to have a lapse of up to one week before they react to something like this. He states that he is basically having a "VAERS", and he explained that is a "vaccine adverse event reporting system".

We went on discuss a little bit about his coverage. He states that he has Mass Casualty coverage which he understood all the executives at the bank have. There is also a group plan through the Prudential.

I asked if he has been in touch with individuals at the bank where he worked, or if they had been in touch with him. He said he occasionally hears from certain individuals. Some people call him more frequently, but the bank president does not necessarily contact him on a regular basis. I asked if he feels he could go back to work at the bank. He said he did not know. He states that he received a letter from the bank where he worked and they told him "we cannot hold the position after April of

Memo to File -- Eric Jeffries

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1999." At the same time he is of the opinion that his position has not been filled even though they have been looking to fill it. He stated, in response to my question, that he had actually discussed the possibility of going back to the bank on an incremental return-to-work basis and he feels that he could possibly negotiate that with the bank. He states "I need to be sure I am not going to be sick before I go back again." He went on to explain how it would be so difficult if he was to have some sickness or have a reaction in the middle of some kind of negotiation or deal.

I inquired what kind of indicators or signs he has of any attack. He states one indicator is a "intense tickling," and he also added that sometimes the abdominal symptoms get worse. He states he has tried to discover what precipitates the attacks, and he cannot come up with any set formula. He has even considered the moon cycles or barometric pressure. The only thing he does know is that he seems to get worse if he pushes himself, such as with exercise. He states that overuse of alcohol "does not help it" and he went on to relate that at one point early in the disease process he went to some sort of an evening function and drank several glasses of wine. He then had a very severe reaction after that. He is very cautious about such utilization of alcohol at the present time.

I asked him to compare how he was on a day-to-day basis when he was not actually suffering any attack. He stated today, which is what he refers to as one of his better days, that he was up at approximately 7:00 a.m. He states that he would not arise that early if he was not feeling so well. He states that he went to Dr. Luggen's office for a 9:30 a.m. appointment and was gone by 11:00 a.m. He went to a store to buy paper and envelopes, and then had been working at his home on his computer writing letters. He tries to walk sometimes, but "walking can be a chore." He is not in any sort of a regular exercise program because he is fearful that it will cause problems. He stated that Dr. Luggen told him to consider swimming for exercise and he is thinking about it. I asked if he had gained weight, and he thought he perhaps has gained approximately 10 pounds.

During our conversation I did hear the voices of young children in the background. He told me that he has two children, ages three and five. He and his wife both share in child care, but they also have a nanny in the house. He states his wife does not work, but she does play tennis at somewhat of a competitive level.

I inquired as to whether he thought in any other ways about going back to work, perhaps in even changing careers. He states that he really does not plan to change careers. His statement was "I was very, very good at what I did." He also went on to state "I have to tell you, I do not want to live the rest of my life like this. If I have to, I may have to do something to accommodate my physical situation." I asked him if he had any very specific thoughts about what he might do. He stated all he is doing now is focusing on getting well. He went on to state that he feels he has lost a great deal as a result of this illness. He states when he first started working he made under \$100,000 a year, and after a few years he was up to making \$450,000 a year, and had stock options on top of that. Because of this illness he has lost his stock options.

Generally speaking, he states he tries not to dwell on the negative, and he commented on that after I asked him if all of these problems had caused him to think about receiving any counseling. He states that he is "trying to get through this." He states he is not necessarily adverse to counseling, but he does not think it is really needed and this has not really gotten to that point. He believes that



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Memo to File -- Eric Jeffries

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his doctors know that it is not "in my head." <sup>72</sup>

I asked him what medications he is taking. He states he is taking colchicine 0.6 mg twice a day. He has only taken it for about a month, and he feels it is too early to tell what kind of response he is going to get. He has tried other medications in the past, but he does not feel he got any benefit from them, so he is not taking any others at this time. He stated that Dr. McClellan actually referred him to a hematologist, a Dr. Marien, who suggested the colchicine. The idea was "it would not hurt, and it might help."

Because I had noted that there were notes from Dr. Daniel Wallace in California, a rheumatologist, I wondered what he learned from that. He stated that he was previously under the opinion that Dr. Wallace had treated people with adverse reactions to hepatitis vaccines. When he got to the appointment, he found that Dr. Wallace did not express that he had special expertise in treating people with that problem. Dr. Wallace did not specifically offer any recommendations to Mr. Jeffries for his problems.

Because he has seen doctors in several states, and even in England, I wondered if there was a problem with his health insurance covering this. He states that his insurance only covers treatment by Dr. McClellan and Dr. Luggen, and only partly. He states that he pays privately for all of the other doctors that he has seen, and he also has to pay for the airfare and the accommodations. He stated he went to England because there was some possibility that had Behçet's disease. He states that there is no conclusion that he actually has it, and he does not think he does. He states that he actually has seen all these doctors because he truly does feel like he needs to get better, and he is not well enough to do the activities that he is used to doing. He realizes he has spent a good deal of money on this, but it is that important to him.

At this time he is next scheduled to see Dr. Luggen in a month though there is no actual appointment scheduled. If he needs to see the doctor prior to then, he would certainly see him.

At the end of our conversation I thanked Mr. Jeffries for his time, and indicated that if he had additional problems we would certainly call him back. I also confirmed that I would be placing calls to his doctors.